

APPLICATION FOR PERMIT TO INSTALL SOLID FUEL, OIL, OR GAS HEATING APPLIANCE

Permit Cost:		Date:
Property Owner:		Permit No.:
Property A	Address:	Tel.:
Мар	Lot	Zoning District
Oil	Gas	Solid Fuel
Work to be	e done	
Maximum	BTU's of Appliance	
Company	doing Installation:	
Installer's Name:		Tel.:
License N	0.:	
Applicant	Signature:	
I hereby o plicable c	certify that all work odes and ordinand	will be done in accordance with all ap- ces in effect as of the date of this permit.
	Prevention Burea n. Tel.: 207-992 -	u must be notified upon completion of 4263
Inspected E	Ву:	
Date:		

White - Office Copy Yellow - Field Copy Pink - Applicant's Receipt Gold - Office Receipt